

# Town of Whitestown Department of Building and Planning 6210 Veterans Dr Whitestown, Indiana 46075

Lauren Bailey
Director of Planning &
Community Development
317.732.4535
planning@whitestown.in.gov

### **RESIDENTIAL BUILDING: ADDITION**

#### PERMIT APPLICATION PACKET

This packet includes details for the documents needed to complete the application process for additions to a residential building.

- Submit application and materials either by
  - E-mail: planning@whitestown.in.gov ----Please merge all documents and materials into one single PDF attachment in the order of the submittal checklist (Page 2).
  - In person: See Lauren Bailey in the Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
  - Mail: Send application and materials to the Building and Planning Department at 6210 Veterans Dr. Whitestown, IN
- Applications whose plans are larger than 11"x17" must be submitted entirely in electronic format (email, CD, or jump drive).

## A complete application includes:

Application

Drainage Permit

• Site Plan

Construction Plans

### **SUBMITTAL CHECKLIST**

Application: Fill out all applicable fields completely.
Parcel Number: Visit the Boone County GIS website
www.boonecounty.in.gov for this 10-digit ID number. Click
"GIS">"AGREE">Search by address or zoom in on the parcel to obtain the
detailed information.
Drainage Permit: Contact Boone County Surveyor, 116 W Washington St,
Room 102, Lebanon, IN 46077, 317.483.4444.
Site Plan: ONE hard copy 8.5"x11"
Construction Plans: ONE hard copy floor plans and a complete cross-section
of the proposed structure 8.5"x11" and ONE hard copy 8.5"x11"

#### PERMIT FEES AND OTHER FEES

Fees are not paid until the permit has been issued and is ready for pick up.

#### **ADDITIONS**

\$215 base fee + applicable inspections:

•	Site Plan Review	\$60
•	Temporary Electric	\$125
•	Footing or Slab Foundation	\$125
•	Rough-in (electric, plumbing, HVAC, frame)	\$125
•	Final	\$125

<u>Failed inspections</u> will be assessed a respective re-inspection fee and must be paid prior to the final inspection or issuance of the Certificate of Occupancy.

Beginning work without securing permits will be assessed a fine of **twice** the calculated permit fee. Fine must be paid before a permit will be issued.

 Questions about inspections or code requirements can be directed to the Whitestown Building Inspector at 317.942.1553

ERMIT APPLICATION	F	For office use only Permit Number:		
nis application is being submi		Permit Fee: EDC Fee: Park Impact		
Residential Addition		ee		
Residential Addition		l:	ssued:	Expires:
Date Application is Submitted:	Driveway Permit:	Draina	age Permit #:	Sewer/Water Permit #:
Applicant and Contact Inf	formation		<u>l</u>	
Name of applicant:				
Address of applicant (street, city, state	, zip):			
Contact person for the permit:				
Contact phone:		Contact email	<u> </u>	
r				
0	- <b></b> .			
Contractor and Contact I	nformation			
Name of contractor:				
Address of contractor (street, city, stat	e, zip):			
Contact person:		Contact phon	e:	
ocation Information				
Address of location to be improved (st	reet, city, state, zip):			
Subdivision:	Sec	Section #:		Lot #:
Parcel number:				
TOTAL structure area or area of work (	sqft):			
·				
Living area:	Garage area:		Other:	
<b>3</b> · · · ·				
Approximate total construction cost:				
Approximate total construction cost.				
he undersigned represents that such work son a good workmanlike manner. Should said w	•	-		
nd of no force or effect whatever. The abov				
ignature of Applicant:				

# **Inspection Estimate Form**

<u>Permit fees</u> are based on the type of permit applied for as well as the required inspections. Use the form below to estimate the quantity of each inspection that will be needed for the project.

<u>Additional inspections and re-inspections</u> will be assessed respectively and must be paid prior to the final inspection or issuance of the Certificate of Occupancy.

This application is being submitted for (check all that apply):								
☐ New Structure ☐ Addition	☐ Accessory Structure ☐ Remodel/Build Out							

Inspection	Quantity Needed	Contractor Name	Contractor Email/Phone
Temporary Electric			Mail:
, ,			Phone:
Footing or Slab/			Mail:
Foundation			Phone:
Rough-in-Electric			Mail:
			Phone
Rough-in-Plumbing			Mail:
			Phone:
Rough-in-HVAC			Mail:
			Phone:
Rough-in-Framing			Mail:
			Phone:
Final .			Mail:
Final			Phone:
Otto an (alabanila a)			Mail:
Other (describe):			iviaii.
			Phone: